## **DIRECTORY OF LICENSED WISCONSIN NURSING HOMES - BY COUNTY**

**DEPARTMENT OF HEALTH AND FAMILY SERVICES** 

Division of Disability and Elder Services

KEY TO DESCRIPTIONS:
Title 18 = Title XVIII, Medicare Certification

Title 19 = Title XVIII, Medicaid Certification

IMD = Institute for Mental Diseases SNF = Skilled Nursing Facility

NF = Nursing Facility

STATE OF WISCONSIN

Bureau of Quality Assurance PO Box 2969 Madison, WI 53701-2969

**County: Adams** 

Monday, May 22, 2006

| County. Addins                   |                              |             | License Number, | Owner, Ownership, Certification             |   |
|----------------------------------|------------------------------|-------------|-----------------|---|---|
| PROVIDER/ADDRESS                 | Contact and Phones           | DHFS REGION | Level and Beds  | Types, Provider Number                      |   |
| MOUNDVIEW MEMORIAL EXTENDED CARE | (608) 339-3331               |             | Lic. 1190       | MOUNDVIEW MEMORIAL HOSPITAL AND CLINICS INC |   |
| 402 W LAKE ST                    | <b>FAX:</b> (608) 339-9385   | NORTHERN    | SKILLED CARE    | VOLUNTARY NONPROFIT ASSOC                   |   |
| FRIENDSHIP, WI 53934             | Administrator: LINDA CHARLES |             | 18 Beds         | 52A050 Title 19 NI                          | F |
| VILLA PINES LIVING CENTER        | (608) 339-3361               |             | Lic. 3089       | VILLA PINES FACILITIES LLC                  |   |
| 201 S PARK ST                    | <b>FAX:</b> (608) 339-9468   | NORTHERN    | SKILLED CARE    | LIMITED LIABILITY COMP(FOR-PROFIT           | ) |
| FRIENDSHIP, WI 53934             | Administrator: VICKI GRANT   |             | 85 Beds         | 525351 Title 18 SNF Title 19 N              | F |